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7590 04/14/2004
 Dale E Fiene
 622 Gaslight Drive
 Algonquin, IL 60102

4-21-04

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DALE FIENE	(Depositor's name)
Dale E. Fiene	(Signature)
4/21/04	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/650,496	08/29/2000	Dale E Fiene		8592

TITLE OF INVENTION: UNDER-CABINET LIGHTING SYSTEM

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$665	\$0	\$665	07/14/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
PAYNE, SHARON E	2875	362-133000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). <input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. <input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.
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PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

OLE K. NILSEN

BONITA SPRINGS, FL

Please check the appropriate assignee category or categories (will not be printed on the patent): individual corporation or other private group entity government

4a. The following fee(s) are enclosed:

Issue Fee
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A check in the amount of the fee(s) is enclosed. 445 B (6)N 5 5NT + RECEIVED
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(Authorized Signature) *Dale E. Fiene* (Date) *4/21/04*

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